



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 2:04 pm, Mar 14, 2014

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 062092	PRINTER SN 03A.2436.094	DATE OF INSPECTION 03/11/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 600 E. Walnut, Columbia		TIME OF INSPECTION 10:43 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION

☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth Labs LOT # 13210 EXP. DATE 07/29/2015

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2761 SIMULATOR EXP DATE 01/07/2015

☒ **CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)**

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 ➡ .099

TEST 2 ➡ .099

TEST 3 ➡ .099

☒ RFI DETECTOR OPERATING

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)**

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

new instrument in service

INSPECTING OFFICER

SIGNATURE

PRINT NAME

Nathan Turner

TYPE II PERMIT NUMBER/EXPIRATION DATE

220411 12-20-14

TELEPHONE NUMBER

(573) 874-7652

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

440 NORTH 16TH STREET • HARRISBURG, PA 17111-4511 • TELEPHONE (717) 531-6170

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13210 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1216% (w/vol) ethyl alcohol. The expiration date for this lot number is July 29, 2018 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C \pm 0.2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L \pm 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Certified Reference Standard lot number RM122211-02 whose values are traceable to NIST.
All balances are calibrated annually by an outside agency using NIST traceable weights.
Calibration verification is done prior to each use utilizing NIST traceable weights.

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 00021

Temp Date Time 210L

Air Blank:
03/11/14 22:47 .000
Calibration Check:
26 03/11/14 22:47 .099

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 00024

Temp Date Time 210L

Air Blank:
03/11/14 22:50 .000
Calibration Check:
27 03/11/14 22:50 .099

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 00019

Temp Date Time 210L

VOID: RFI
12 03/11/14 22:43

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 00020

Temp Date Time 210L

Air Blank:
03/11/14 22:45 .000
Calibration Check:
25 03/11/14 22:45 .099

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD